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PTO/SB/01 (03-01)  
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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing    OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Attorney Docket Number</b>	
	<b>First Named Inventor</b>	<b>François ICHAS</b>
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	
	<b>Filing Date</b>	
	<b>Group Art Unit</b>	
	<b>Examiner Name</b>	

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am an original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD FOR DEMONSTRATION OF A MOLECULAR EVENT IN A CELL BY MEANS OF FLUORESCENT MARKER PROTEINS**

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **06/30/2004** as United States Application Number or PCT International

Application No. **PCT/FR2004/001678** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
0308186	FRANCE	07/04/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

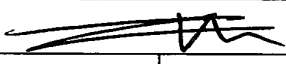
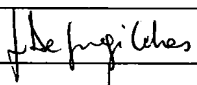
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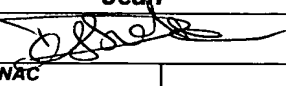
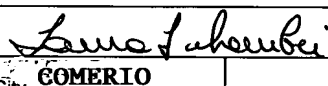
## DECLARATION — Utility or Design Patent Application

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 000530

Direct all correspondence to:	<input checked="" type="checkbox"/> Customer Number or Bar Code Label	000530	OR <input type="checkbox"/> Correspondence address below
Name			
Address			
City	State	ZIP	
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
François		ICHAS	
Inventor's Signature		Date	
		03/02/2006	
Residence: City:	State	Country :	Citizenship:
PESSAC		FRANCE	French
Mailing Address:	104, avenue de Candau, 33600 PESSAC - FRANCE		
City :	State	ZIP:	Country:
PESSAC		33600	FRANCE
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Francesca		DE GIORGI ICHAS	
Inventor's Signature		Date	
		03/02/2006	
Residence: City:	State	Country:	Citizenship:
PESSAC		FRANCE	Italian
Mailing Address:	104, avenue de Candau, 33600 PESSAC - FRANCE		
City:	State	ZIP:	Country:
PESSAC		33600	FRANCE
<input checked="" type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

LD-537A

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<b>DECLARATION</b>		<b>ADDITIONAL INVENTOR(S) Supplemental Sheet</b>	
		Page ____ of ____	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) <b>Pier-Vinceenzo</b>		Family Name or Surname <b>PIAZZA</b>	
Inventor's Signature 		Date <b>03/02/2006</b>	
Residence: City <b>BORDEAUX</b>	State	Country: <b>FRANCE</b>	Citizenship: <b>Italian</b>
Mailing Address: <b>20, rue Père Louis de Jabrun, 33000 BORDEAUX - FRANCE</b>			
City: <b>BORDEAUX</b>	State	Zip: <b>33000</b>	Country: <b>FRANCE</b>
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) <b>Jean</b>		Family Name or Surname <b>DESSOLIN</b>	
Inventor's Signature 		Date <b>03/02/2006</b>	
Residence: City <b>MERIGNAC</b>	State	Country: <b>FRANCE</b>	Citizenship: <b>French</b>
Mailing Address: <b>Bât B 3 allée Philippe de Champaigne, 33700 MERIGNAC - FRANCE</b>			
City: <b>MERIGNAC</b>	State	Zip: <b>33700</b>	Country: <b>French</b>
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) <b>Laura</b>		Family Name or Surname <b>SCHEMBRI</b>	
Inventor's Signature 		Date <b>03/02/2006</b>	
Residence: City <b>COMERIO</b>	State	Country: <b>ITALY</b>	Citizenship: <b>Italian</b>
Mailing Address: <b>Via Muro 86 -- 65</b>			
City: <b>COMERIO</b>	State: <b>ITALY</b>	Zip: <b>21025</b>	Country: <b>ITALY</b>
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) <b>Flora</b>		Family Name or Surname <b>TOMASELLO</b>	
Inventor's Signature <b>TALENCE</b>		Date	
Residence: City <b>TALENCE</b>	State	Country: <b>FRANCE</b>	Citizenship: <b>FRENCH</b>
Mailing Address: <b>2, rue Roustaing, 33400 TALENCE - FRANCE</b>			
City: <b>TALENCE</b>	State	Zip: <b>33400</b>	Country: <b>FRANCE</b>

PTO/SB/02A (09-04)

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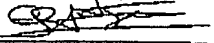
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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet		Page ____ of ____
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor		
Given Name (first and middle (if any))		Family Name or Surname		
<i>Lydia</i>		<i>LARTIGUE</i>		
Inventor's Signature 		Date <i>28/02/06</i>		
Residence: City: <i>DEL MAR</i>	State: <i>CALIFORNIA</i>	Country: <i>USA</i>	Citizenship: <i>French</i>	
Mailing Address:	<i>2288 Via Aprilia, Del Mar, CA, 92014, USA</i>			
City: <i>DEL MAR</i>	State: <i>CALIFORNIA</i>	Zip: <i>92014</i>	Country: <i>USA</i>	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Inventor's Signature		Date		
Residence: City	State	Country	Citizenship	
Mailing Address:				
City	State	Zip	Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Inventor's Signature		Date		
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City	State	Zip	Country	
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Given Name (first and middle (if any))		Family Name or Surname		
Inventor's Signature		Date		
Residence: City	State	Country	Citizenship	
Mailing Address:				
City	State	Zip	Country	